PTO/SB/22 (12-04) Approved for use through 7/31/2006. OMB 0651-0031

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Under the Paperwork Recurson Act of			Docket Number (Optional) 0630-2009PUS1			
Application Number 09/509,725-Conf. #9859			Filed	March 29, 2000		
For PLASMA POLYMERIZATION	ON ON SURFACE	OF MATERIAL				
Art Unit 1753			Examiner	K. Mayekar		
This is a request under the provisi identified application.		. ,		. •		
The requested extension and fee	are as follows (che	eck time period desi	red and enter the a	appropriate fee below):		
		<u>Fee</u>	Small Entity Fe	_		
One month (37 CFR	1.17(a)(1))	\$120	\$60	\$		
X Two months (37 CFR	1.17(a)(2))	\$450	\$225	\$ 225.00		
Three months (37 CF	R 1.17(a)(3))	\$1020	\$510	<u>\$</u>		
Four months (37 CFR	? 1.17(a)(4))	\$1590	\$795	\$		
Five months (37 CFR	1.17(a)(5))	\$2160	\$1080	\$		
X A check in the amount of the Payment by credit card. For The Director has already box The Director is hereby authoposit Account Number	orm PTO-2038 is a	attached. charge fees in this a any fees which may		edit any overpayment, to		
Statem	f record of the enti ent under 37 CFR	ire interest. See 37 3.73(b) is enclosed Registration Numbe	. (Form PTO/SB/9	96).		
x attorney or	agent under 37 C	FR 1.34.				
	on number if acting u		32,868	•		
//	M////		Janu	ary 19, 2006		
Si	gnature			Date		
	w D. Meikle			3) 205-8000		
NOTE Signatures of all the inventors or a than one signature is required, see below.	r printed name	entire interest or their repr	•	hone Number . Submit multiple forms if more		
Total of 1	forms are subm	itted.				

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE uction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 09/509,725-Conf. #9859 **Application Number FEE TRANSMITTAL** March 29, 2000 Filing Date First Named Inventor Seok-Keun KOH For FY 2005 **Examiner Name** K. Mayekar Applicant claims small entity status. See 37 CFR 1.27 1753 Art Unit 0630-2009PUS1 **TOTAL AMOUNT OF PAYMENT** 575.00 Attomey Docket No. METHOD OF PAYMENT (check all that apply) X Check Credit Card Money Order None Other (please identify):

A Sincer Cream Cr	*··u	ioney Order			picase identii	·y).		
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identi	fied deposit a	ccount, the D	irector is he	reby authorize	d to: (check	all that apply)		
Charge fee(s)	indicated bek	wc		Charge	e fee(s) indi	cated below, e	xcept for t	he filing fee
X Charge any ad	Iditional fee(s 37 CFR 1.16 a) or underpay and 1.17	ment of	x Credit	any overpay	yments		
FEE CALCULATION								
1. BASIC FILING, SEARCH	, AND EXAM	INATION FEI	ES				"	
İ	FILING	3 FEES	SEARCH FEES		EXAMINATION FEES			
Application Type		Small Entity	F (\$)	Small Entity	F (A)	Small Entity	_	.
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	<u>Fee (\$)</u>	Fee (\$)	Fee (\$)	<u>rees</u>	Paid (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (includi	ng Reissues)						50	25
Each independent claim over	er 3 (including	g Reissues)					200	100
Multiple dependent claims	` '	,					360	180
Total Claims Extra C	Claims Fe	ee (\$)_	Fee Paid	1 (\$)	<u>Mu</u>	<u>ltiple Depend</u>	ent Claims	į
34 34 =0) x	= _			<u>Fee</u>	(\$)	Fee Paid (<u>\$)</u>

listings under 37	CFR 1.52(e)), the a	pplication size fee due is \$250 (\$125 for small entity S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)		Fee Paid (\$)
10	0 =	/50 (round up to a whole number) x		. = _	
4. OTHER FEE(S)					Fees Paid (\$)
Non-English Spec	ification, \$130 fee	(no small entity discount)			-
Other (e.g., late fi	mile sui chai ec i.	01 Notice of appeal			250.00
(3.8, 3.33	22	52 Extension for response within second month			225.00

Fee Paid (\$)

100.00

SUBMITTED BY	// //				
Signature	/and///	Registration No. (Attorney/Agent)	32,868	Telephone	(703) 205-8000
Name (Print/Type)	Andrew D. Meikle			Date	January 19, 2006

Extra Claims

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3. APPLICATION SIZE FEE

Fee (\$)

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